## 

FEC FORM 3

Office

Use

Only

## REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

28 Office Use Only AM 10: 04

**FEC FORM 3** 

(Revised 02/2003)

							Offic	e Use Only	110.04	
1. NAME (	OF ITEE (in full)	TYPE OR PRINT	Example: If typing, type over the lines:			12FE4	12FE4M5 LUMAIL CENTER			
FRELING	HUYSEN FOR CON	GRESS 190		<u></u>			1 1 1	<u>L. I. I. J. J.</u>	<u> </u>	
		<u> </u>						<u> -  -  -  -  -  -  -  -  -  -  -  -  -  </u>	1	
ADDRESS (number and street) 19 CAT			o avenue	1111	<u>.</u>		1.1.1.	<u> </u>		
▼ Che	Check if different than previously reported. (ACC)	L	<u></u>		1.1.1.1.1		<del></del>	<u> </u>	لسب	
thar		MORRISTOW	N	<u> </u>		NJ	0796	50	1_1_1	
2. FEC IDI	ENTIFICATION NUM	MBER ▼	CITY	<b>\</b>		STATE ▲	·	ZIP CODE		
C oc	)247 <b>4</b> 94.		3. IS THIS REPOR	H WA	NEW (N) OR	AN (A	MENDED )	STATE	DISTRICT	
(a) Qua	OF REPORT (Choorterly Reports:  April 15 Quarterly Reports (Choorterly Reports)  July 15 Quarterly Report (Choorterly Reports)  January 31 Year-End  Termination Report (T	port (Q1) port (Q2) Report (Q3) Report (YE)	Election	Prima Conve on POST-Electi Gener	n Report for the ry (12P) Intion (12C) On Report for the rail (30G)	Gender Special American	off (30R)	in the State of	ecial (30S)	
	Period 07  have examined this  Name of Treasurer		2014  he best of my LESHNER		35-72-53	30 true, correct	201			
Signature of Ti	reasurer	my t	eshm	······································		Date 1	0 0	9 2	014	
NOTE: Submiss	sion of false, erroneou	s, or incomplete	information ma	y subject the	person signing	this Report to	the penal	ties of 2 U.S.C	). §437g.	